

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
C.I.P.E. CLASSIFIER		40	6/14/01
FORMALITY REVIEW	H.T	913	08/01/01
RESPONSE FORMALITY REVIEW	MTB 427	954 3m	11/6/01 03/15/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	6/14/02
2	12/12/02
3	12/12/02
4	12/12/02
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50	12/12/02

Claim	Date
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Claim	Date
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